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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (M.R. 4818).				Complete if Known				
				Application Num	nber 10/587,	540		
FEE TRANSMITTAL For FY 2009			┺┟	filing Date July 28, 2		2006		
				First Named Inventor Massayos		shi HORIUCH	li et al	
Applicant dains sm	il ontity states	. See 37 CFR 1.27	L	Examiner Name	NIcole E	Suie		
-		. SEE ST OFR 1.27	—[	Art Unit	4145			
TOTAL AMOUNT OF PA	YMENT (\$	940		Allomay Docket	No. 121036	0092		
METHOD OF PAYMEN	NT (check al	that apply)						
Check Credit Card Money Order None Other (please identify);								
Deposit Account Deposit Account Number: 23-1925 Deposit Account Name: Brinks Hofer Gilson & Lione								
		account, the Director						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any under 37 CF ARNING: Information on the formation and authorization	R 1.16 and 1 is form may b	scome public. Credit d		(s) 🔽 Credit	any overpaymen	ts	-	
FEE CALCULATION		<u> </u>						
, BASIC FILING, SEA	RCH, AND	EXAMINATION FI	EES					
	FILING	FEES :		HFEES	EXAMINATIO	N FEES		
Application Type	Eq. (\$)	imali Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		<u>  Entity</u> e_{5}	Fees Paid (\$)	
Utility	330		540	270		10 01		
Design	220		100	50		70 _	······································	
Plant	220		330	165		85 <u>-</u>		
Reissue	330		540	270		25 <b>-</b>	<u> </u>	
Provisional	220	110	0	0	0	0 _		
2. EXCESS CLAIM FEES Sm							#I Entity 99 (\$) 26	
Each independent claim over 3 (including Reissues)						220	110	
Multiple dependent claims						390	195	
Total Claims - 20 or HP = HP = highest number of total		_ ×=	Fee F	Pald (\$)		luitipie Depend Fee (\$)	fent Claims Fee Paid (\$)	
Indep, Claims	Extra Clain	ns <u>Fee (\$)</u>	Fee F	'aid (\$)				
-3 or HP = HP = highest number of inde	ependent dalms	x= : paid for, if greater then	13.					
APPLICATION SIZE If the specification and	FEE d drawings o	xceed 100 sheets	of pape					
sheets or fraction t		, the application si 35 U.S.C. 41(a)(1 25 Number 1 750 =	)(G) at	nd 37 (°FR 1.10 additional 50 or		Fee (5)	Ete Paid (5)	
Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (5)	
Other (e.g., late filin	ng surcharge	: Request for Contin	nued Exa	amination and Or	ne Month Extensi	on of Time	940.00	
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nature						Telephone 734	-302-6000	
ms (Print/Tune) Michael S							Date September 28, 2009	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on this amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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